

Duloxetine (say: dew-locks-e-teen)

What is duloxetine used for?

- Duloxetine (also called Cymbalta®) is mainly used to help treat the symptoms of depression (by reducing the time it takes to recover and to help stop the symptoms coming back)
- It can also help treat the symptoms of anxiety, pain from diabetes and stress incontinence (with a different trade name Yentreve®)
- Duloxetine is sometimes called an SNRI (Serotonin and Noradrenaline Reuptake Inhibitor)
- It is made as capsules.

- ☞ For depression, about 2 in 3 (65%) people get better with a first antidepressant in 4-6 weeks
- ☞ If that antidepressant doesn't work, or it has too many side effects, switching to another means about half of those people get better (total of about 75%, or 3 in 4 people). There are other options after that.

What is the usual dose of duloxetine?

- The usual dose of duloxetine is around 60-120mg each morning for depression.

How should I take duloxetine?

- Swallow the capsules with at least half a glass of water whilst sitting or standing, so they reach the stomach and do not stick in your throat.

When should I take duloxetine?

- It can be taken with or after food
- If the label says to take it once a day this is usually best in the morning.

What are the alternatives to duloxetine?

- This depends what you are taking it for. There are many other medicines (e.g. SSRIs, mirtazapine, venlafaxine), talking therapies and treatments for depression and anxiety.

- ☞ See our "Handy charts" for depression and anxiety to help you compare the medicines available
- ☞ This will help you talk to your doctor, pharmacist or case manager.

How long will duloxetine take to work?

- For depression, the effect starts in a week or so, and carries on building for the next few weeks
- If nothing has improved after 4 weeks it's time to look at a higher dose or switching to another.

Been depressed before? Antidepressants don't seem to help much? Been irritable, impulsive, and spent too much money? Been overactive, with less need for sleep? Family history of bipolar? If so, it's worth asking: **"Could it be bipolar?"**

How long will I need to keep taking it for?

- This will depend on what you are taking it for, your history and how well you are doing.

For depression, if an antidepressant gets you better:

- ☞ First episode: Taking it for a further 6 months reduces the chances of becoming depressed again
- ☞ Second episode: Taking it for 1-2 years reduces the chances of becoming depressed again
- ☞ Three or more episodes: Taking for at least 3-5 years reduces the chances of becoming depressed again.

Is duloxetine addictive and can I stop taking duloxetine suddenly?

- Duloxetine is not addictive (e.g. you don't get craving or a reward from a dose), but if you stop it suddenly you might get some discontinuation, adjustment or withdrawal symptoms
- At worst, these could include headache, feeling restless, diarrhoea, nausea, 'flu-like symptoms, stomach cramps, and sleep disturbances
- They can start 2-4 days after stopping or dropping your dose, usually only last a few weeks (but can be longer) and will go restarted
- Your symptoms can also come back a few weeks or months later
- When the time comes, you should come off it by a gradual reduction in the dose over several weeks at a time when your stress levels are lower
- You should discuss this fully with your doctor, doctor, nurse or pharmacist.

See our handy fact sheets on 'Coming off Medicines' and 'Coming off antidepressants'

What should I do if I forget to take a dose of duloxetine at the right time?

- Start again as soon as you remember unless within about 12 hours of your next dose
- If you remember after this time, just take the next dose as normal
- Do not try to catch up by taking two doses at once as you may get more side-effects.

If you have problems remembering your doses (many people do) ask your pharmacist, doctor or case manager about this. Webster, other packs and Apps can help you.

Can I drink alcohol while I am taking it?

- If you drink alcohol while taking duloxetine it may make you feel more sleepy
- This is important if you need to drive or operate machines and you must seek advice on this.

Will duloxetine affect my other medication?

Duloxetine's main interactions include:

- The effects of duloxetine can be increased by ciprofloxacin or enoxacin (this is dangerous)
- Smoking can decrease the effects of duloxetine
- Duloxetine can increase the effect of beta-blockers (e.g. propranolol, atenolol) or warfarin.

You **must** see the Consumer Medicine Information (CMI) for the full list. Some medicines can still be used together but you must follow your doctor's instructions carefully.

Can I drive, cycle or operate a boat while I am taking it?

- You may feel a bit sleepy at first when taking duloxetine
- You should be careful as it may slow down your reaction times
- Until this wears off, or you know how duloxetine affects you, do not drive or operate machines.

Will I need any blood or other tests if I am taking duloxetine?

- You should not need any extra blood tests.

What sort of side-effects might I get if I am taking duloxetine?

This table shows some of the most common side effects and any you might need to take action on. You **must** also see the Consumer Information Leaflet (CMI) for the full list of possible side effects but do not be worried by this. Some people get no side effects at all. Others may get some that are not listed. Some side effects are the brain getting used to a medicine and these usually wear off in a few days or weeks. Starting at a lower dose may help. If you think you might have a side effect to this medicine, you should ask your doctor, pharmacist or case manager.

Side effect	What happens	What to do about it
VERY COMMON (<i>more than about 1 in 10 people might get these</i>)		
Dizziness	Feeling light-headed and faint.	Don't stand up too quickly. Try and lie down when you feel it coming on. Don't drive.
Constipation	When you want to poop but can't (the opposite of diarrhoea). You can't pass a motion.	• Eat enough fibre, cereal or fruit • Drink enough fluid • Keep active and get some exercise e.g. walking. If this does not help, ask your pharmacist for a mild laxative.
Dry mouth	Not much saliva or spit.	Suck sugar-free lollies or gum. If it is bad, your doctor may be able to give you a mouth spray.
Nausea and vomiting	Feeling sick and/or being sick.	Take your duloxetine with or after food. If you are sick for more than a day, contact your doctor. This tends to wear off after a few days or a week or so.
Sexual dysfunction	Finding it hard to have an orgasm. No desire for sex	Discuss with your doctor.
Insomnia	Not being able to get to sleep or stay asleep.	Take your dose in the morning. Discuss with your doctor.
RARE but important (<i>can be serious if not dealt with quickly</i>)		
Thoughts of harming yourself	Feeling anxious, restless, poor sleep and feel you might want to harm yourself	See your doctor in the next day, more so if you are under about 20 years old, might have bipolar depression, or are paranoid/seeing things
Hyponatraemia (low sodium)	Tiredness, confusion, headaches, unable to concentrate, muscle cramps and fits.	See your doctor in the next day, especially if you have started it in the last month, after a dose change, or if you are older and female
Serotonin syndrome	Confusion, agitation, restless, sweating, fever, fast heartbeat, twitching	See your doctor in the next day especially if you have just started, had a dose increase, overdose, or are taking any other medicines

☎ Lifeline provides 24hr telephone crisis support on 13 11 14 or visit www.lifeline.org.au for information & downloads

The small print: This leaflet is to help you understand more about duloxetine. You **must** also read the manufacturer's Consumer Medicine Information (CMI) Leaflet. You may find more on the internet but beware as internet-based information is not always accurate. Do not share medicines with anyone else.

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